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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	Novel CC-Chemokine Binding Tick Proteins				
As the belo	As the below named inventor(s), t/we declare that:				
This declara	ation is directed to:				
	The attached application, or				
	Application No. PCT/EP2004/053638 , filed on December 21, 2004 ,				
	as amended on(if applicable);				
I/we believe sought;	I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;				
	eviewed and understand the contents of the above-identified application, including the claims, as amended by any specifically referred to above;				
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAM	E OF INVENTOR(S)				
	e: CHRISTINE POWER				
	Citizen of: UNITED KINGDOM				
Inventor two: AMANDA PROUDFOOT					
Signature:	Citizen of:				
Inventor three: ACHIM FRAUENSCHUH					
Signature:	Citizen of:				
Inventor for	ur:				
Signature:	Citizen of:				
North States	incelling stars as a local corresponds tive are being named as				

Additional inventors or a legal representative are being named on additional form(s) attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	
Filing Date	June 16, 2006
First Named Inventor	Christine Power
Title	CC-Chemokine Binding Tick Proteins
Art Unit	
Examiner Name	
Attorney Docket Number	ARS-128

I hereby revoke all previous powers of attorney given in the above-identified application.					
I hereby appoint:					
Practitioners associated with the Customer Number: 23557					
OR	ļ				
Practitioner(s) named below:					
Name Registration Number	Registration Number				
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent Trademark Office connected therewith.	and				
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Telephone Email Email I am the:					
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature Date					
Name CHRISTINE POWER Telephone					
Title and Company					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
*Total of forms are submitted.					

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I hereby revoke all previous powers of attorney given in the above-identified application.					
I hereby appoint:					
Practitioners asso	✓ Practitioners associated with the Customer Number: 23557				
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as my/our attorney(s) of Trademark Office conne	r agent(s) to prosecute the application identified ected therewith.	above, and to transact all busin	ess in the United States Patent and		
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I am the:					
Applicant/Inve	entor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature			Date		
Name	AMANDA PROUDFOOT		Telephone		
Title and Company					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
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I hereby revoke a	II previo	us powers of attorney giv	en in the abo	ove-ide	ntified applica	tion.		
I hereby appoint:								
Practitioners as	Practitioners associated with the Customer Number: 23557							
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l am the: Applicant/inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature						Date		
Name ACHI		FRAUENSCHUH				Telephone		
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